	neral report and committee		signed and sub	. 1	Amendment Yes No her detailed forms.	
1. Committee Info	to update information					
a. Full Name	maton				c. ID Number	
	ELECT JOHN WEAVER		Sand han doubt to	nas F. D. Lean, South	C. ID Number	
b. Mailing Address (inc	lude City, State and Zip Code)		1 to Course Donard To	new H. A. Branch South	d. Date Filed	
450 STONEYFIELD DRIVE SOUTHERN PINES, NC 28387					10/27/2020	
	;				e. Phone Number	
	and the second of the second o	' .	MOOR		(910) 692-5839	
2. Report Year	3. Period Start Date (mm/	dd/yy) 4. Period (mm/dd/yy)	End Date	5. Treasurer Full	Name	
2020	12/03/2019	10/1	7/2020	JOHN NELSON	WEAVER	
6. Type of Commit		9. Type of Report			from one category)	
Candidate Camp	· = ·	Municipal	State/C		Referendum	
PAC Independent	Referendum	Organizational	-	Organizational	Organizational	
Expenditure	Joint Fundraiser	Thirty-five day	Y (Quarterly	Pre-referendum	
Legal Expense F 7. Type of Fund	una (if applicable, check one)	Pre-primary	· _	First		
"Booster Fund"	10 approved to the control of the co	Pre-election	IH	Second	Supplemental Final	
Building Fund		Pre-runoff		Third	Annual	
		Semi-annual		Fourth	Special Special	
Other:		Mid Year Year End	·	Semi-annual Mid Year		
Cinci.		Final	' ∺	Year End	10. Special Report Name	
8. Number of Fund	raisers this Report	Special		Final		
	0			Special		
11. Account Information 11. Account Information						
a. Financial Institution Full Name a. Financial Institution Full Name						
N/A b. Purpose	c. Account Code	, , , , , , , , , , , , , , , , , , ,	b. Purpose		T. A (C.)	
b. I til post	C. Account Code		o, rarpose		c. Account Code	
d. Period Begin Balance		£ .		* .	d. Period Begin Balance	
	\$. •	\$	
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections. JOHN NELSON WEAVER Printed Name of Signer Signature of Appointed Treasurer Date						
FOR OFFICE USE O	DNLY	:	- On	_		
Date Received:	10121130	Employee:	CX	14	Delivery Method Normal Mail	
Date Postmarke	d:	Employee:	·	<u> </u>	Registered Mail Hand Delivered	
Date Scanned:		Employee:		·	Electronically Filed Signer has not received	
Date Data Enter	red:	Employee:	· ———	· · · · · · · · · · · · · · · · · · ·	mandatory training	
Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.						

Moore county fiblic con

Amendment

Detailed Summary
Use this form to summarize all disclosure reporting forms and to total monetary information.

COMMITTEE TO ELECT JOHN WEAVER THIRD QUARTER REPORT					
Start of Election Cycle: January 1,	2017	Total this Reporting Period	Total this Election Cycle		
4) Cash on Hand at Start		\$ 0	\$ 0		
RECEIPTS			organismi (p. 1818) Partini ili di propinsi di		
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$		
6) Contributions from Individuals	\$ 2778.27	\$ 2778.27			
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$		
8) Contributions from Other Political Committees	\$	\$			
9) Loan Proceeds	(CRO-1410)	\$	\$		
10) Refunds/Reimbursements To the Committee	\$	\$			
11) Other Receipt Sources					
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$		
11b) Contributions from Not-for-Profit Organizat	ions <i>(CRO-1250)</i>	\$	\$		
11c) Outside Sources of Income	(CRO-1250)	\$	\$		
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	\$		
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$		
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 1	lc, Ild and Ile)	\$ 2778.27	\$ 2778.27		
EXPENDITURES	STANDARD CONTRACTOR OF THE STANDARD CONTRACTOR O				
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$	\$		
13b) Contributions to Candidates/Political Comm	ittees (CRO-1310)	\$	\$		
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$		
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$		
15) Loan Repayments	(CRO-1420)	\$	\$		
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$		
17) In-Kind Contributions	(CRO-1510)	\$ 2778.27	\$ 2778.27		
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14,	\$ 2778.27	\$ 2778.27			
19) Cash on Hand at End (Add lines 4 and 12 together, then st	\$ 0	\$ 0			
<u>ADDITIONAL INFORMATION</u>					
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$			
21) Outstanding Loans (incl. ones from other campai	gns) <i>(CRO-1430)</i>	\$			
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$			
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$			
24) Account Transfers Within the Committee	\$				
25) Administrative Support	(CRO-1710)	\$	\$		
26) Forgiven Loans	(CRO-1440)	\$	\$		
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	\$		
28) Contributions to be Refunded	(CRO-1215)	\$	\$		

Amendment **Contributions from Individuals** Yes No Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 1. Committee Full Name (and Fund if applicable) 2. ID Number COMMITTEE TO ELECT JOHN WEAVER 3. Contributor Information Add

| | Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments RETIRED **CANDIDATE** (include city, state, & zip) JOHN WEAVER **450 STONEYFIELD DRIVE** c. Employer's Name/Specific Field **SOUTHERN PINES, NC 28387** RETIRED e. Election Sum to Date (910) 692-5839 2753.27 \$ f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount FILING FEE IN-KIND 12/03/2019 \$ 47.00 **IN-KIND** YARD SIGNS 01/22/2020 \$ 462.67 IN-KIND CAMPAIGN CARDS 01/27/2020 21.39 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) RETIRED CANDIDATE JOHN WEAVER **450 STONEYFIELD DRIVE** c. Employer's Name/Specific Field **SOUTHERN PINES, NC 28387** RETIRED (910) 692-5839 e. Election Sum to Date 2753.27 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount IN-KIND **CAMPAIGN CARDS** 02/01/2020 \$ 21.39 IN-KIND **BADGE HOLDER** 02/12/2020 \$ 8.55 **IN-KIND** CAMPAIGN MAGNET 02/13/2020 107.00 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) RETIRED **CANDIDATE** JOHN WEAVER **450 STONEYFIELD DRIVE** c. Employer's Name/Specific Field **SOUTHERN PINES, NC 28387** RETIRED (910) 692-5839 e. Election Sum to Date 2753.27 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount IN-KIND \$ YARD SIGNS 08/04/2020 486.60 IN-KIND YARD SIGNS 08/18/2020 \$ 486.60

CRO-1210

4. Total only this Page

5. Total of ALL CRO-1210 Pages

IN-KIND

(This line must be on line 6 of Detailed Summary Page CRO-1100)

NC State Board of Elections

09/12/2020

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\$

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GOLF SPONSOR

April 2007

2778.27

150.00

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MOOR COUNTY PUBLIC CORV

Contributions from Individuals Yes M No Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 2. ID Number 1. Committee Full Name (and Fund if applicable) COMMITTEE TO ELECT JOHN WEAVER 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) RETIRED **CANDIDATE** JOHN WEAVER 450 STONEYFIELD DRIVE c. Employer's Name/Specific Field **SOUTHERN PINES, NC 28387** RETIRED (910) 692-5839 e. Election Sum to Date 2753.27 h. Form of Payment f. Prior g. Account Code i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount П 20.13 **IN-KIND BADGE HOLDERS** 10/08/2020 \$ **IN-KIND RUBBER BANDS** 10/08/2020 S 4.55 IN-KIND **CAMPAIGN CARDS** 10/08/2020 \$ 21.39 S. 海州。1980年1月1日至 3. Contributor Information Add | Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) **RETIRED CANDIDATE** JOHN WEAVER 450 STONEYFIELD DRIVE c. Employer's Name/Specific Field SOUTHERN PINES, NC 28387 RETIRED (910) 692-5839 e. Election Sum to Date 2753.27 f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount IN-KIND ADVERTISMENT 10/12/2020 916.00 \$ 3. Contributor Information Add Remove b. Job Title/Profession a. Full Name, Mailing Address & Phone d. Comments FOOD FOR MEET & GREET (include city, state, & zip) RETIRED MYRON DICE 514 EAST NEW JERSEY AVENUE c. Employer's Name/Specific Field RETIRED **APARTMENT 5314 SOUTHERN PINES, NC 28387** e. Election Sum to Date (910) 692-0490 25.00 f. Prior g. Account Code h, Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amount \$ **FOOD** 02/19/2020 25.00 IN-KIND \$ \$ 4. Total only this Page \$ 987.07 5. Total of ALL CRO-1210 Pages \$ 2778.27

(This line must be on line 6 of Detailed Summary Page CRO-1100)

Amendment